New Jersey Farm Link Program

State Agriculture Development Committee PO Box 330 Trenton, NJ 08625



Farmland Purchaser Questionnaire

This form is to be completed by prospective participants in the Farm Link Program. Please answer the following questions as completely as possible. If you have any questions, please call 609-633-2593.

Farmland Purchaser (Please complete Addendum A if the purchaser is a multiple partnership, etc.)

LAST NAME	FIRST NAME		MIDDLE INITIAL	
FARM, CORPORATE OR BUSINES	SS NAME			
FORM OF BUSINESS (USE CODE	FROM APPENDIX A, ITEM A)			
ADDRESS		CITY		
COUNTY	STATE	ZIP		
HOME PHONE	WORK PHONE	FAX		
IN WHAT NEW JERSEY COUNTIL	ES ARE YOU INTERESTED IN FARMING?			
DESCRIBE YOUR HOUSING NEE	DS:			
WHAT TYPE OF FARMING OPER	ATION ARE YOU INTERESTED IN? (PLEASE US	SE CODES LISTED IN A	APPENDIX A, ITEM B)	
ARE YOU CURRENTLY FARMING HOW MUCH ACREAGE DO YOU I				
DESCRIBE BUILDINGS AND FACI	LITIES THAT YOU DESIRE, INCLUDING CAPAC	CITY:		
LIVESTOCK/POULTRY/DAIRY/EQ	UINE FACILITIES			
FEED STORAGE				
MANURE STORAGE				

EQUIPMENT STORAGE

FARM LABOR HOUSING
OTHER OUTBUILDING NEEDS
HOW DO YOU ENVISION THE TRANSACTION/BUSINESS ARRANGEMENT TAKING PLACE? PURCHASE OPTION TO PURCHASE SHARE LEASE EMPLOYEE/EMPLOYER (WORKING AGREEMENT WITH FUTURE TRANSFER) LEASE WITH OPTION TO PURCHASE LIKE-KIND EXCHANGE
COMMENTS:
DO YOU DESIRE TO PURCHASE/LEASE A FARM OPERATION IMMEDIATELY? YES NO IF YOUR ANSWER IS NO, AT WHAT TIME DO YOU EXPECT TO PURCHASE/LEASE A FARM OPERATION? ARE YOU INTERESTED IN FARMING A PERMANENTLY PRESERVED FARM? YES NO HOW LONG DO YOU WANT OR EXPECT THIS TRANSFER TO TAKE? MINIMUM TIME (YRS/MONTHS) MAXIMUM TIME (YRS/MONTHS)
COMMENTS:
PLEASE BE ADVISED THAT ALL INFORMATION SUPPLIED BY THE FARMLAND PURCHASER WILL ONLY BE USED FOR THE FARM LINK PROGRAM.
I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND ARE MADE IN GOOD FAITH FOR THE PURPOSE OF PARTICIPATING IN THE NEW JERSEY FARM LINK PROGRAM.
I GIVE THE NEW JERSEY FARM LINK PROGRAM PERMISSION TO RELEASE MY NAME, ADDRESS, PHONE NUMBER AND ANY OTHER INFORMATION PROVIDED IN THIS QUESTIONNAIRE TO PERSONS WHO ARE INTERESTED IN DISCUSSING A POSSIBLE BUSINESS ARRANGEMENT WITH ME.
SIGNATURE OF FARMLAND PURCHASER DATE
PLEASE RETURN FORM TO:
STATE AGRICULTURE DEVELOPMENT COMMITTEE PO BOX 330 TRENTON, NJ 08625 ATTN: NEW JERSEY FARM LINK

APPENDIX A

Please utilize the following codes when completing the Questionnaire.

A. FORM OF BUSINESS

TYPE	CODE
Sole proprietor (Husband & Wife)	(01)
Multiple proprietors	(02)
Corporation	(03)
Partnership	(04)
Estate	(05)
Trust	(06)
County	(07)
Municipality	(08)
Conservation Org.	(09)
Institution	(10)

B. STANDARD INDUSTRIAL CLASSIFICATION CODES (S.I.C.)

01	Agricultural Production-Crops	0211	Beef Cattle Feedlots
0111	Wheat-Cash Grain Farms	0212	Beef Cattle Except Feedlots
0112	Rice-Cash Grain Farms	0213	Hogs
0115	Corn-Cash Grain Farms	0214	Sheep & Goats
0116	Soybeans-Cash Grain Farms	0219	General Livestock nec
0119	Cash Grain nec	0241	Dairy Farms
0131	Cotton-Field Crop Farms	0251	Fowls, Broilers & Fryers
0132	Tobacco-Field Crop Farms	0252	Chicken Eggs
0133	Sugar-Field Crop Farms	0253	Turkeys & Turkey Eggs
0134	Irish Potatoes-Field Crop Farms	0254	Poultry Hatcheries
0139	Field Crop Farms	0259	Poultry & Eggs nec
	Except Cash Grains	0271	Fur-bearing Animals & Rabbits
0161	Vegetable & Melon Farms	0272	Horse & Other Equine
0171	Berry Farms	0279	Animal Specialties nec
0172	Grape Farms	0279A	Fish Farms
0173	Tree Nut Farms	0279B	Bee Farms
0174	Citrus Fruit Farms	0291	General Farm Livestock
0175	Deciduous Tree Fruit Farms	(Nec) =	Not elsewhere classified
0179	Fruit & Tree Nut Farms nec		
0181	Ornament Nursery Products		
0182	Food Crops Grown Undercover		
0189	Horticulture Specialties		
0191A	General Farming nec		
02	Agricultural Production Livestock		

ADDENDUM A

MULTIPLE PROPRIETOR/PARTNER/CORPORATE OFFICER/TRUST/EXECUTOR/EXECUTRIX

1.	Last name:				
	First name: M.I				
	Is the individual a partner? (Y/N)				
	Is the individual an executor/executrix? ((Y/N)				
	Is the individual a multiple proprietor? (Y/N)				
	Is the individual a corporate officer? (Y/N)				
	Is the individual a trustee? (Y/N)				
	Is the individual the primary contact? (Y/N)				
2	Last name				
2.	Last name:				
	First name:M.I				
	Is the individual a partner? (Y/N)				
	Is the individual an executor/executrix? ((Y/N)				
	Is the individual a multiple proprietor? (Y/N)				
	Is the individual a corporate officer? (Y/N)				
	Is the individual a trustee? (Y/N)				
	Is the individual the primary contact? (Y/N)				
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3.	Last name:				
	First name:M.I				
	Is the individual a partner? (Y/N)				
	Is the individual an executor/executrix? ((Y/N)				
	Is the individual a multiple proprietor? (Y/N)				
	Is the individual a corporate officer? (Y/N)				
	Is the individual a trustee? (Y/N)				
	Is the individual the primary contact? (Y/N)				